



Alternative Beverage Corporation

Tax Invoice

The Alternative Beverage Corp (Pty) Ltd

Postal Address: P O Box 7198 Northern Paarl 7646

Physical Address: Unit 12 Ever Green Park 471 Sam Green Road, Green Hills Tunney EXT 6, Germiston 2057

Telephone 1: 0861 744 447
Liquor License: RG 000265
Facsimile: 021 870 1139
VAT No: 4520133960
Delivery Day: Monday

To: **Tops @ Oudtshoorn (35920)**

Delivery Address: 90 Voortrekker Street Oudtshoorn

VAT No: 4960187096

Postal Address:

Account TOP163
Date 07/04/2025
Warehouse 006
External Order Markel
Our Reference INV58961

Code	Item Description	WHS Warehouse Name	QTY	Unit	Price (Ex)	Price (In)	Disc %	Total Excl	Tax	Total (Incl)
CJ OR	Cactus Jack Original Sours	006 Liquor Runners GEO	3.00	Case06.750	732.78	842.70	0.0 %	2 198.35	329.75	2 528.10

RETURNS ON INVOICE

PRODUCT CODE	QTY TRUCK DAMAGED	QUANTITIES	REASON
See	1	12033	Truck Damaged

OUDTSHOORN TOPS

GRV NO: 6363 / 4 CLM
RCVD BY: J. J. J. J.
DATE: 14/04/25
SIGN: [Signature]

DISTRIBUTOR
LIQUOR RUNNERS GEORGE
RG0002813

Received by _____
Date _____
Signed _____

BANK DETAILS

Bank Name: First National Bank
Bank Account: 62553290869
Branch Code: 210243

Kindly use your Account Number as Reference when processing payments. Thank you.

Total (Excl)	2 198.35
Tax	329.75
Total (Incl)	2 528.10
Discount	0.00
Total (Incl)	2 528.10

STORE DROPSHIPMENT CLAIMS ONLY

NO: **A 780822**

SUPPLIER NAME: **Alternative Beverage**

STORE NAME: **Quintaform** STORE CODE: **35920**

ADDRESS: _____

TOWN: _____ STORE TEL: _____ DATE: **14/4/25**

TEL NO: () _____ SUPPLIER INV NO: **58961** SUPPLIER INV DATE: _____ (Use a separate claim per supplier invoice)

QTY	PACK SIZE	CASES	UNITS	CODE/ BARCODE	PRODUCT DESCRIPTION	PRICE (EXCL)	VAT	PRICE (INCL)	REASON
1		1	5	58961	actus 1.5l orange juice	732.78	109.91	842.69	damaged
TOTAL						R			

GOODS HANDLED TO: **Mark** (PRINT NAME) CLAIM PREPARED BY: **[Signature]**

SIGNATURE: **[Signature]** DATE: **14/4/25**

VEHICLE REG. NO: **FCV1915** (NBI) SIGNATURE: **[Signature]**

RECORD OF CONTACT WITH SUPPLIER: (STORE MUST FOLLOW UP BEFORE SUBMITTING TO D.C.)

DATE	PERSON SPOKEN TO	DETAILS



REQUEST FOR CREDIT - CR20434549 2025-04-15 12:15:33

LOAD SHEET Reference - LSID , DATE Delivered -

Reg. No.	Truck Description	Load Capacity	Driver Name	Dispatcher	Checker
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Reason for Credit: Damage in Transit

Customer Name: TOPS SPAR OUDTSHOORN

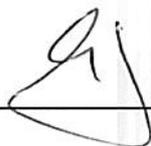
Brief Description of Credit:

Principal Customer Code: TOP163

Doc. Date: 2025-04-07 **Doc. Ref:** INV58961ALT **GRV:** 6363/4 **Credit Type:** Part Credit **Invoice Amt:** R 2528.1

Stock Code	Stock Description	Unit	Packsize	Reason Code	Reason	Batch	QTY
ALTCJ OR	Cactus Jack Original Sours	CS	Case - 06 Bottl	DT	Damage in Transit		1

Total Number of Items to be credited on Document Ref: INV58961ALT (1 Product Type)

Authorized by: 
[date]



Alternative Beverage Corporation

Tax Credit Note

The Alternative Beverage Corp (Pty) Ltd

Postal Address:

P O Box 7198
Northern Paarl
7646

Physical Address:

Unit 12 Ever Green Park
471 Sam Green Road, Green Hills
Tunney EXT 6, Germiston
2057

Telephone: 0861 744 447

Facsimile: 021 870 1139

VAT No: 4520133960

Liquor License: RG 000265

Warehouse: 006

Credit Reason: Damaged

To: **Tops @ Oudtshoorn (35920)**

90 Voortrekker Street
Oudtshoorn

VAT No: 4960187096

Account TOP163
Date 15/04/2025
Invoice No INV58961
External Order Morkel
Our Reference CRN3284

Code	Item Description	WHS	Warehouse Name	QTY	Unit	Price (Ex)	Price (In)	Disc %	Total Excl	Tax	Total (Incl)
CJ OR	Cactus Jack Original Sours	006	Liquor Runners GEO	1.00	Case06.750	732.78	842.70	0.0 %	732.78	109.92	842.70
	Damaged in transit										

Received by _____
 Date _____
 Signed _____

BANK DETAILS
 Bank Name: First National Bank
 Bank Account: 62553290869
 Branch Code: 210243
 Kindly use your Account Number as Reference
 when making EFT Payments. Thank You.

Total (Excl)	732.78
Tax	109.92
Total (Incl)	842.70
Discount	0.00
Total (Incl)	842.70